File Original and First Copy with Department of Ecology Second Copy - Owner's Copy Third Copy - Oriller's Copy

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EICY 050-1-20 (10:87) -1329-

WATER WELL REPORT

3/10 3/6 Start Card No 027893

STATE OF WASHINGTON

Third (Copy Driller's Copy	Water Right Permit No.			
1)	OWNER: Name George Tesch	Address 2618 N. SWANTOWN, OAKHARB			
2)	LOCATION OF WELL: County 1 SLAND	6W 1/ NE 1/ Sec 32 T 33 N. R I E V			
	STREET ADDDRESS OF WELL (or nearest address) 2618 N SU	VANTOWN Rd,			
3)	PROPOSED USE: Domestic Industrial [] Municipal []	(10) WELL LOG or ABANDONMENT PROCEDURE DESCRIPTION Describe by color, character, size of material and structure, and s			
	1 5 BOTTATO	thickness of equifers and the kind and nature of the material in each stratum panetra			
4)	TYPE OF WORK: Owner's number of well (if more than one)	with at least one entry for each change of information. MATERIAL FROM TO			
	Abandoned : New well 🔣 Method: Dug 📃 Bored 🛄	HARD PAN - 0 120			
	Deepened ☐ Cable M Driven ☐ Reconditioned ☐ Rotary ☐ Jetted ☐				
	A seconditional to				
	DIMENSIONS: Diameter of wellinches.	WATER IN GRAVE (3 GPM) 203 205			
ı	Drilled 375 feet. Depth of completed well 375 ft.	GRAVELY CIAY 205 520			
5)	CONSTRUCTION DETAILS:	SOUPY WATER SAND (2/2 GPM) 320 327			
-,	Casing installed: 6 · Diam. from 0 ft. to 371 /2-ft.	HARD SANDY CLAY 322 373			
	Welded Dism. from ft. to ft.	WATER GRAVE/ (20GPM) 373 373			
ι	iner installed [] Threaded Diam. from ft. to ft. to t.	- COMPAN CHANGE TO STATE OF THE			
_	•	· · · · · · · · · · · · · · · · · · ·			
	Type of perforator used in. by in.				
•	perforations fromft. toft.				
	ft. toft.				
	perforations fromft. toft.				
	Screens: Yes No				
	Manufacturer's Name HUSTON				
	Type STAIN ESS Model No.				
	Diam. 6 Slot size 15 from 370 ft. to 375 ft.				
	Diam. Slot size from ft. to ft.				
	Gravel packed: Yes No Size of gravel				
'	Graver placed from				
	Surface seal: Yea No To what depth? 20 +h.				
	Material used in seal	1 1989			
	Type of water?Depth of strate	T. M. 11303			
	Method of sealing strate off	DEPARTMENT CS ECOLOGY			
		DEPARTMENT CENTER OF NORTHWEST RECION			
7)	PUMP: Menufacturer's Name	NORTHWEST WE TO			
	Type: H.P. H.P.				
8)	WATER LEVELS: Land-surface elevation above mean sea level 6.5				
	Static level 45 ft. below top of well Date July 184				
	Artesian pressureIbs. per square inch Date Artesian water is controlled by				
	(Cap, valve, etc.))	Work started 19. Completed July 19			
9)	WELL TESTS: Drawdown is amount water level is lowered below static level				
	Was a pump test made? Yes No X If yes, by whom?	WELL CONSTRUCTOR CERTIFICATION:			
	Yield: gal /min. with ft. drawdown efter hrs.	and its compliance with all Washington well construction standards. Materials used and the information reported above are true to my best			
	· · · · · · · · · · · · · · · · · · ·				
	Recovery data (time taken as zero when pump turned off) (water level measured	knowledge and belief.			
	from welf top to water level) Time Water Level Time Water Level Time Water Level	MILLIARED DAMIERS			
		(PERSON, FIRM, OR CORPORATION) (TYPE OR PRINT			
		DAK HAGRER ILLASL			
		Address Address			
	Date of test	1 1/2 Taker 129			
	Bailer test 20 gal./min. with 134 tt. drawdown after 4 hrs.	(Signet) License No. / License No. /			
	Airtest gal./min. with atem set at ft. for hrs.	Contractor's Registration			
	Artesian flow g.p.m. Dete	No Will 289 MM Date 4 4 4 19			
	Temperature of water Was a chemical analysis made? Yes No X	THE ADDITIONAL CHEETS IS NECESSARY			
	Tomporative of water	(USE ADDITIONAL SHEETS IF NECESSARY)			



Well Tagging Form

Unique Well Tag No: APR 770

RECORD VERIFICATION (check ✓one)

W

Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you).

If a well report is not available, please complete a "Water Well Report for an Existing Well" form. This form is available at Ecology's headquarters office. Do not use this form for wells that do not have a Water Well Report.

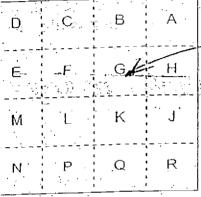
WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT					
First Name: Tesch Water Syst-Name:					
Street Address: PO Box 1652					
city: Oak Harbor state: WA 98277					
LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT					
Well Address: Parcel R13332-300-3530; Swantown Road and Smith Island Road					
City: Oak Harbor County: Island					
T. 33 N. R. 1 E W.M. Sec. 32 SW 1/2 of the NE					
Latitude $\frac{48}{122}$ $\frac{13}{42}$ $\frac{3276}{646}$ $\frac{1}{12}$ $\frac{3276}{12}$ $\frac{1}{12}$					
Elevation at land surface					

SEE BACK SIDE OF PAGE...



WELL CHARACTERISTICS

ocation of Well identification Tag:			
- Strapped to Well	casing		
(in dog house le	an-to at wast	and of	pump house



Scale 1:24,000 (1" = 2,000')

Indicate the location of the well within the Section by drawing a dot at that point

SECTION 32

COMMENTS

